CASE 0:20-cv-02532-ECT_DTS Doc. 178-28 Filed 07/24/23 Page 1 of 4

Bureau of Prisons Health Services Clinical Encounter

Inmate Name: MANCINI, MARIO FERBO Reg #: 11007-041

Date of Birth: 02/23/1972 Sex: M Race: WHITE Facility: ELK Encounter Date: 09/23/2011 14:55 Provider: Lepiane, R. MD Unit: F06

Follow-up encounter performed at Health Services.

SUBJECTIVE:

COMPLAINT 1 Provider: Lepiane, R. MD

Chief Complaint: GENERAL

Subjective: Problems: #1 Chronic neck since 1996 # 2 possible right cervical radiculopathy #3 Chronic

Right knee S/P surgery in 2002 # 4 Borderline hyperlipidemia

He need a lower bunk pass He continue to complain of neck pain 7/10 and right knee pain 6/10 He denies any chest pain No S.O.B. No pedal edema No heartburn symptoms No other

joint pains No lower back pains no skin pronblems

Pain Location: Neck-Back

Pain Scale: 7

Pain Qualities: Dull | Aching

History of Trauma:
Onset: 5+ Years
Duration: 5+ Years

Exacerbating Factors: he also has right knee pain 6/10

Relieving Factors:

Comments:

ROS:

General

Constitutional Symptoms

No: Chills, Fever, Night Sweats, Unexplained Weight Loss, Weakness

GΙ

General

Yes: Normal

No: Constipation, Diarrhea, Dyspepsia, Nausea, Vomiting

OBJECTIVE:

Pulse:

DateTimeRate Per MinuteLocationRhythmProvider09/23/201115:02 ELK58Via MachineRegularLepiane, R. MD

Respirations:

 Date
 Time
 Rate Per Minute
 Provider

 09/23/2011
 15:02 ELK
 18 Lepiane, R. MD

Blood Pressure:

DateTimeValueLocationPositionCuff SizeProvider09/23/201115:02 ELK124/76Left ArmSittingAdult-largeLepiane, R. MD

SaO2:

DateTimeValue(%)AirProvider09/23/201115:02 ELK98 Room AirLepiane, R. MD

Exam:

General

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Bureau of Prisons - ELK



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Inmate Name: MANCINI, MARIO FERBO Reg #: 11007-041

Date of Birth: 02/23/1972 Sex: M Race: WHITE Facility: ELK Encounter Date: 09/23/2011 14:55 Provider: Lepiane, R. MD Unit: F06

Exam:

Appearance/Nutrition

Yes: Appears Well, NAD, Alert and Oriented x 3

Skin

No skin rashes or lesions

Head

H.E.E.N.T---- Normal

Neck

General

Yes: Supple

No: Lymphadenopathy

Musculoskeletal

Yes: Full ROM, Tenderness, Paravertebral Tenderness on Palpation

No: Muscle Spasms, Midline Tenderness on Palpation

He has moderate neck pains with movement He has right and left paravertebral tenderness C4 to C7 area R >L No point vertebral tenderness

Pulmonary

Auscultation

Yes: Clear to Auscultation Bilaterally

No: Rhonchi, Wheezing

Cardiovascular

Auscultation

Yes: Regular Rate and Rhythm (RRR)

No: M/R/G **Peripheral Vascular**

General

No: Pitting Edema

Abdomen

Palpation

Yes: Soft, Non-tender on Palpation

Musculoskeletal

Right knee --- full ROM no swelling no effusion No laxity No locking He has crepitus and mild to moderate pain with movemnet There is no localized tenderness

No other joint pains swelling or tenderness

Lower Back ---- full ROM No pains

Neurologic

He has a slightly decreased right hand grasp 4+/5 His Strength otherwise 5/5 throughout He has numbness in his right hand 4th and 5th fingers He has pain radiating into his right posterior shoulder down into the triceps area of right upper arm and extending to his right forearm suggestive of a possible right cervical radiculopathy

ASSESSMENT:

DescriptionICD9StatusStatus DateProgressTypeNeck pain, cervicalgia723.1Current08/18/2011NotChronicHealth Problem Comments:

chronic neck pain

His CT scan of his neck shows marginal, osteophytes He has prominent osteophyte formation at right C5-6 and right C6-7 associated with neural foraminal encroachment

Diagnosis Comments:

Continue his Cabapentin 1100 mg twice a day and motrin as needed for pain

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CASE 0:20-cy-02532-ECT-DTS Doc. 178-28 Filed 07/24/23 Page 3 of 4

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Date of Birth: 02/23/1972 Sex: M Race: WHITE Facility: ELK Encounter Date: 09/23/2011 14:55 Provider: Lepiane, R. MD Unit: F06

<u>Description</u> <u>ICD9</u> <u>Status</u> <u>Status Date</u> <u>Progress</u> <u>Type</u>

He was give a soft cervial collar to use at night

No extra pillow

Other and unspecified 272.4 Current 08/18/2011 At Treatment Goal Chronic

hyperlipidemia

Health Problem Comments:

borderline hyperlipidemia LDL = 130 in March 2011

Repeat a lipid profile in Oct 2011

No med at this time

Diagnosis Comments:

Borderline His LDL= 130 in march 2011 He is just at goal No meds currently

Enthesopathy of knee, 726.60 Current 08/18/2011 Not Chronic

unspecified

Health Problem Comments:

right knee

Right knee surgery in 2002 for damage to his patella tendon

Diagnosis Comments:

persistent right knee painsXray of his rght knee shows mild DJD he ha thicken of his quadreceops tendon

Continue quap strengthening exercises and motrin as needed for pain

Axis I: Schizophrenia 295.9 Resolved 04/08/2011 At Treatment Goal History/Resolved

Diagnosis Comments:

remains in remission No psych meds

Hyperpotassemia 276.7 Current 08/18/2011 Treatment Goal History/Resolved

Health Problem Comments: Attained

probable secondary to hemolysis

Check a repeat K +

Diagnosis Comments:

resolved his repeat K+ in Aug 2011 was normal at 4.2

Secondary to hemolysis

PLAN:

Discontinued Medication Orders:

<u>Rx#</u> <u>Medication</u> <u>Order Date</u> <u>Prescriber Order</u>

97222-ELK Magnesium Oxide 400 MG Tab 09/23/2011 14:55 Take one tablet by mouth at

bedtime * nm

Improved/Same

Discontinue Type: When Pharmacy Processes

Discontinue Reason: discontinue

Indication:

New Consultation Requests:

Consultation/Procedure <u>Due Date</u> <u>Priority</u> <u>Translator</u> <u>Language</u>

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Pain Management No

Reason for Request:

Request for a lower buck pass

38 y/o WM with neck pain since 2003, (work related due to trauma). His C-spine CT scan shows: Mild to moderate cervical spondylosis with multilevel disc degeneration; & Osteophyte discs complexes at C5-6 and to a greater degree at C6-7 extending towards the right and associated with neural foramina encroachment at both levels

On exam: He has a slightly decreased right hand grasp 4+/5 His Strength otherwise 5/5 throughout He has numbness in his right hand 4th and 5th fingers He has pain radiating into his right posterior shoulder down into the triceps area of right upper arm and extending to his right forearm suggestive of a possible right cervical radiculopathy

He also has chronic right knee pain

Provisional Diagnosis:

chronic neck pain

numbness in his right hand 4th and 5th fingers He has pain radiating into his right posterior shoulder down into the triceps area of right upper arm and extending to his right forearm suggestive of a possible right cervical radiculopathy

Chronic right knee pain

Disposition:

Follow-up in 2 Months

Patient Education Topics:

Date Initiated	<u>Format</u>	<u>Handout/Topic</u>	<u>Provider</u>	<u>Outcome</u>
09/28/2011	Counseling	Plan of Care	Lepiane, R.	Verbalizes Understanding

Copay Required: No Cosign Required: No

Telephone/Verbal Order: No

Completed by Lepiane, R. MD on 09/28/2011 20:13